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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

TEMPORARY FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

1314146

OMB APPROVAL

OMB Number: 3235-0076 Expires: September 30, 2008 Estimated average burden hours per response. . . . 4.00



UNIFORM LIMITED OFFERING EXEM	PTION 09004031
Name of Offering (check if this is an amendment and name has changed, and indicate change Convertible Promissory Note Issuance	2.)
Filing Under (Check box(es) that apply): Rule 504 Rule 505 X Rule 506 Section Type of Filing: X New Filing Amendment	n 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
RadarFind Corporation	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
2100 Gateway Centre Blvd., Ste 150, Morrisville, NC 27560	(919) 228-2102
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	SEC Iviali Processing Section
Health Care Technology Company	0000
Type of Business Organization	FEB 1 2 2009
	olease specify): Washington, DC
CN for Canada; FN for other foreign jurisdiction) GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 Conotice in paper format on or after September 15, 2008 but before March 16, 2009. During that per initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using	FR 239.500T) or an amendment to such a iod, an issuer also may file in paper format an
comply with all the requirements of § 230.503T. Federal: Who Must File: All issuers making an offering of securities in reliance on an exception under Reg	ulation D or Section 4(6), 17 CFR 230.501 et
seq. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at a address after the date on which it is due, on the date it was mailed by United States registered or of Where To File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 2	offering. A notice is deemed filed with the U.S. he address given below or, if received at that ertified mail to that address.
Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be must be a photocopy of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only any changes thereto, the information requested in Part C, and any material changes from the information Fart E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee. State:	report the name of the issuer and offering,
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate each state where sales are to be, or have been made. If a state requires the payment of a fee as a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate Appendix to the notice constitutes a part of this notice and must be completed.	e notice with the Securities Administrator in precondition to the claim for the exemption, a
Foilure to file notice in the appropriate states will not result in a loss of the federal ex	comption Conversaly follows to file the

appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the

filing of a federal notice.

A. BASIC IDENTIFICATION DATA		
2. Enter the information requested for the following:		
 Each promoter of the issuer, if the issuer has been organized within the past five years; 		
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10 	% or more of a cla	ss of equity securities of the issuer.
 Each executive officer and director of corporate issuers and of corporate general and managing 	partners of partn	ership issuers; and
 Each general and managing partner of partnership issuers. 		
Check Box(es) that Apply: Promoter X Beneficial Owner X Executive Officer X	Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Bahram, B. Bobby Business or Residence Address (Number and Street, City, State, Zip Code)		
2100 Gateway Centre Blvd., Ste 150, Morrisville, NC 27560		
Check Box(es) that Apply: Promoter X Beneficial Owner Executive Officer X	Director [General and/or Managing Partner
Fotsch, Robert M. Full Name (Last name first, if individual)		<u> </u>
2100 Gateway Centre Blvd., Ste 150, Morrisville, NC 27560 Business or Residence Address (Number and Street, City, State, Zip Code)		
business of residence reading (realise) and entering entry, busine, any overs,		
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer	Director [General and/or Managing Partner
Fotsch, William R. Full Name (Last name first, if individual)	·	
801 Windgate Court, Villa Hills, KY 41017 Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer X	Director	General and/or Managing Partner
Kane, William J. Full Name (Last name first, if individual)		
2100 Gateway Centre Blvd., Ste 150, Morrisville, NC 27560		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(cs) that Apply: Promoter Beneficial Owner X Executive Officer	Director [General and/or
Jackson, Stephen S.		Managing Partner
Full Name (Last name first, if individual)		
2100 Gateway Centre Blvd., Ste 150, Morrisville, NC 27560		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter X Beneficial Owner Executive Officer	Director	General and/or Managing Partner
Westwind Investors, LP Full Name (Last name first, if individual)		
917 Tahoe Blvd., Ste. 200, Incline Village, NV 89451		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Check Box(es) that Apply: Promoter X Beneficial Owner Executive Officer	Director [General and/or Managing Partner
Viera, Paul E.		
Full Name (Last name first, if individual)		
238 15th Street, #12 Westchester Square, Atlanta, GA 30309		
Business or Residence Address (Number and Street, City, State, Zip Code)		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					B. IN	NFORMATI	ON ABOU	T OFFER	ING				
1.	Has the	issuer sold	, or does th			ll, to non-ac						Yes	No X
2.	What is	the minim	um investm			• •		-				\$	
						•						Yes	No
3.			permit joint ion request										
4.	commis If a pers	sion or sim on to be lis i, list the na	ilar request ilar remune ted is an ass me of the b you may so	ration for s ociated pe roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok ore than five	ers in conne er or deale e (5) persor	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in the EC and/or	he offering. with a state		
Fu	ll Name (Last name	first, if indi	vidual)									
N/ Bu	A siness or	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)			·			
							<u> </u>					-	
Na	me of As	sociated Br	oker or Dea	aler									
Sta			Listed Has										
	(Check	"All States	or check	individual	States)	191111111111111111111111111111111111111		.,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NI TX	CO LA NM UT	ME MY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	ID MO PA PR
Fu	II Name (Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Na	me of As	sociated Bi	oker or De	aler								_	
Sta			Listed Has										
	(Check	"All States	s" or check	individual	States)				•••••	•••••		☐ A1	1 States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NI TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Fu	ll Name (Last name	first, if ind	ividual)					-				
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Na	ime of As	sociated B	roker or De	aler					-				
Sta	ates in W	hich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers	 ;				4	
	(Check	"All State:	s" or check	individual	l States)		•••••••	***************************************	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1 States
	AL IL MT RI	AK IN NE SC	IA IA NY SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	EL ML OH WV	GA MN OK WI	MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Aggregate	Amount Already
	Type of Security	Offering Price	Sold
	Debt		\$
	Equity	<u> </u>	\$
	Common X Preferred		
	Convertible Securities (including warrants)	3,000,000	\$1,037,000
	Partnership Interests		\$
	Other (Specify))	\$
	Total		\$
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number	Aggregate Dollar Amount
		Investors	of Purchases
	Accredited Investors	12	\$ 1,037,000
	Non-accredited Investors	9	\$_0
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees] \$
	Printing and Engraving Costs		\$
	Legal Fees	X	\$ <u>2,500</u>
	Accounting Fees	_] \$
	Engineering Fees] \$
	Sales Commissions (specify finders' fees separately)] \$
	Other Expenses (identify)] \$
	Total		1

	C. OFFERING PRICE, NUME	BER OF INVESTORS, EXPENSES AND USE C	F PROCEEDS	
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."		ss	\$ <u>2,997,500</u>
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	y purpose is not known, furnish an estimate a the payments listed must equal the adjusted gro	nd	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🔲 \$. 🗆 \$
	Purchase of real estate			
	Purchase, rental or leasing and installation of mac	hinery		_
	Construction or leasing of plant buildings and fac		_	
	Acquisition of other businesses (including the val offering that may be used in exchange for the asset issuer pursuant to a merger)	ue of securities involved in this ets or securities of another		_
			_	
	Repayment of indebtedness		_	-
	Working capital			
	Other (specify):		- L 3	_ 🔲 ³
			- 🗌 \$	
	Column Totals		🔲 💲	s
	Total Payments Listed (column totals added)		X \$ 2	997,500
		D. FEDERAL SIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Comr	nission, upon writte	
Iss	uer (Print or Type)	Signature	Date	
Ra	darFind Corporation	1. Rut 41. Dr	January 30,	2009
	me of Signer (Print or Type)	Title of Signer (Print or Type)		
T.	Robert Tyler, III	Assistant Secretary		

ATTENTION

		E. STATE SIGNATURE			
1.	* * *	230.262 presently subject to any of the disc		Yes	No □
	•	See Appendix, Column 5, for state re	esponse.		
2.	The undersigned issuer hereby under D (17 CFR 239.500) at such times	ertakes to furnish to any state administrator o as required by state law.	fany state in which this notice is f	iled a no	tice on Form
3.	The undersigned issuer hereby und issuer to offerees.	lertakes to furnish to the state administrator	rs, upon written request, informa	tion furn	ished by the
4.	limited Offering Exemption (ULOI	that the issuer is familiar with the condition E) of the state in which this notice is filed ar f establishing that these conditions have be	id understands that the issuer clai		
	uer has read this notification and know athorized person.	rs the contents to be true and has duly caused	this notice to be signed on its beha	lf by the	undersigned
Issuer ((Print or Type)	Signature	Date		
Radar	Find Corporation	1. Rht 1 Acres	January 30,	2009	

Instruction:

Name (Print or Type)

J. Robert Tyler, III

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				A	PPENDIX				
1	lntend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA		х	Convertible Not	e 2	\$14,000	0	0		
СО									
СТ									
DE									
DC									
FL									
GA		х	Convertible Not	1	\$115,000	0	0	ļ.,, <u>-</u>	
Н									
ID									
IL									
IN									
lA									
KS									
KY	·	Х	Convertible Note	1	\$50,000	0	0		
LA									
ME		!							
MD									
MA									
MI									
MN									
MS									

				APP	ENDIX				
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes No			Number of Accredited Investors	Accredited Non-Accredited			Yes	No
МО									
МТ									
NE									
NV		х	Convertible Note	1	\$250,000	0	0		
NH									
NJ									
NM									
NY									
NC		х	Convertible Note	7	\$553,000	0	0		
ND									
ОН									
ок									
OR									
PA		х	Convertible Not	e 1	\$25,000	0	0		
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
wv									
WI		х	Convertible Note	1	\$30,000	0	0		

				APP	ENDIX					
1		2	3		4					
	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)		amount purchased in State				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR										

END